## PATENT APPLICATION Effective

## DETERMINATION RECORD ober 1, 2001

application or Docket Number

10/08/6/2

TOTAL CHARGEABLE CLAIMS  INDEPENDENT CLAIMS  INDEPENDENT CLAIM PRESENT  * If the difference in column 1 is less than zero, enter "0" in column 2  X\$ 9=  CR  X\$ 9=  OR  OR	RATE BASIC FEE  X\$18=  X84=  +280=	FEE
FOR NUMBER FILED NUMBER EXTRA  TOTAL CHARGEABLE CLAIMS 22minus 20= * 2	RATE BASIC FEE  X\$18=  X84=  +280=	FEE
FOR NUMBER FILED NUMBER EXTRA  TOTAL CHARGEABLE CLAIMS 22minus 20= * 2  INDEPENDENT CLAIMS 4 minus 3 = * / X\$ 9= OR  MULTIPLE DEPENDENT CLAIM PRESENT  * If the difference in column 1 is less than zero, enter "0" in column 2  TOTAL OR	X\$18= X84= +280=	- A
TOTAL CHARGEABLE CLAIMS  2 minus 20= * 7  INDEPENDENT CLAIMS  4 minus 3 = * /  MULTIPLE DEPENDENT CLAIM PRESENT  * If the difference in column 1 is less than zero, enter "0" in column 2  TOTAL  OR	X\$18= X84= +280=	36
INDEPENDENT CLAIMS  # If the difference in column 1 is less than zero, enter "0" in column 2  * If the difference in column 1 is less than zero, enter "0" in column 2  * TOTAL  OR  TOTAL  OR	X84= +280=	:84
MULTIPLE DEPENDENT CLAIM PRESENT  * If the difference in column 1 is less than zero, enter "0" in column 2  TOTAL  OR	+280=	84
* If the difference in column 1 is less than zero, enter "0" in column 2		_1
///		200
CLAIMS AS AMENDED - PART II	TOTAL	:
/0/00/19 (Column 1) (Column 2) (Column 2) SMALL FATTY OR	OTHER	
CLAIMS (COOKINGS)	SMALLE	
REMAINING AFTER AMENDMENT NUMBER PREVIOUSLY PAID FOR PAID FOR PAID FOR TOTAL INdependent    REMAINING NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA  PATE TIONAL FEE  X\$ 9= OR  X42=	RATE	ADDI- TIONAL FEE
Total • 28 Minus • 20 = X\$ 9= OR	X\$18=	·
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  OR  X42=  OR	X84=	
	+280=	
ADDIT FEE OR A	TOTAL DDIT, FEE	
(Column 1) (Column 2) (Column 3)		·
REMAINING NUMBER PRESENT ADDI-	RATE	ADDI- TIONAL
Total * Minus ** = X\$ 9=	X\$18=	FEE_
Independent + Minus +++ = X49= OR X42=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X42= OR	X84=	
	+280=	٠
ADDIT. FEE OR AD	TOTAL DDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST		
REMAINING NUMBER PRESENT ADDI- AFTER PREVIOUSLY EXTRA RATE TIONAL		ADDI- TIONAL
Total + Minus ++ = X\$9= OP :	V840	FEE
Independent • Minus *** = OR	X\$18=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X42= OR	X84=	
If the entry in column: 1 is less than the entry in column 2 write to in column 2	+280=	
if the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20.	TOTAL OIT. FEE	